CHULA VISTA POLICE DEPARTMENT PAWN SHOP OWNER RENEWAL FORM

NAME:				
Name of F	Last Pawnshop:	First	M	
ADDRESS	S:			
HOME #:		wo	_ WORK #:	
EMAIL AD	DRESS			
	CONVICTIONS IN Tase list on back side of	THE PAST 12 MONTHS of this application)	S: YES	_ NO
EXPIRATION DATE OF PERMIT:			DATE OF BIRTH:	
SOCIAL SECURITY #:		CD	L #:	
WEIGHT:	HEIGHT:	HAIR COLOR:	EYE COLOR:	AGE:
> > > > > If permit	Money Order or Cas CVPD renewal fee - Copy of government Copy of City of Chul One 2" x 2" photos t is EXPIRED MOR	t I.D. la Vista Business Licen aken within the last six	o, payable to Departmentant (check payable to see months. EKS, a new Police	
	Y NOT OPPERAT CONTROLLED LI		OF CHULA VISTA	WITHOUT A VALID
	TY THAT THE INF AND ACCURATE.	ORMATION PROV	IDED ON THIS AF	PPLICATION IS

FALSIFICATION OF ANY INFORMATION ON THIS FORM IS GROUNDS FOR

DATE

SIGNATURE:

DISQUALIFICATION.

ALL FEES ARE NON REFUNDABLE.

Please contact (619) 691-5244 to make an appointment to turn in application or if you require additional information.

ALL EMPLOYEES must have a permit to work in Pawn Shop which must be renewed annually.

2B2 REV 12/11 lg